SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 86 / 136
(check only one)	

X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Emergency Medicine Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lawrence R R Schwartz

Mailing Address 4201 St Antoine 6G-UHC

City	State	Zip Code
Detroit	MI	48201-2153

FEC ID number of contributing
federal political committee.   **C**

Name of Employer
Med Ctr Emer Svcs

Occupation
Emergency Physician

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: C499595

Amount of Each Receipt this Period
100.00

Aggregate Year-to-Date ▼
300.00

B.

Full Name (Last, First, Middle Initial)
David Charles Charles Seaberg

Mailing Address 960 E 3rd St Ste 100

City	State	Zip Code
Chattanooga	TN	37403-2133

FEC ID number of contributing
federal political committee.   **C**

Name of Employer
Univ TN Colg of Med-Deans
Ofc

Occupation
Emergency Physician

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 6 / 2 0 0 8

Transaction ID: C499299

Amount of Each Receipt this Period
250.00

Aggregate Year-to-Date ▼
750.00

C.

Full Name (Last, First, Middle Initial)
Geneiso Armando Serri

Mailing Address 2600 6th St SW
Aultman Hosp

City	State	Zip Code
Canton	OH	44710-1702

FEC ID number of contributing
federal political committee.   **C**

Name of Employer
Aultman Hosp

Occupation
Emergency Physician

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: C495968

Amount of Each Receipt this Period
250.00

Aggregate Year-to-Date ▼
250.00

SUBTOTAL of Receipts This Page (optional) .... ▶   600.00

TOTAL This Period (last page this line number only) .... ▶